CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only
Application No H23/0883/98
Date registered 07 SEP 1998
Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

MR+MRS N M MCLAUGHLIN
5 OAK VIEW
BRETTON
PETERBOROUGH

Tel. No. 01733 449222 (0973 752478

NAME AND ADDRESS OF AGENT
(if form completed by Agent)

N/A

Tel. No

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

MATHESON HOUSE
OXCROFT BANK

SHEPEAU STOW SPALDING

OFFICE COPY
H23/0415/98

Please complete

EARLIER APPLICATION No.

This application **cannot be considered** unless the relevant reference is stated

Please complete

I attach the necessary plans and apply for approval as detailed below

Signed ..... Date 3/9/98

Please complete the section below.

This form is for approval of additional details. For approval of [illegible] use this form – ask for Planning Application forms

If a condition restricts activity in some way and you wish to remove [illegible] not use this form – ask for Planning Application forms

If a condition requires activity to be carried out in a certain way [illegible] for approval, unless the condition specifically requires it

2. The application is for approval of details required by a condition ✓

State which details are submitted

APPROVAL LETTER FROM LCC REGARDING ARCHAEOLOGICAL WATCHING BRIEF.

State drawing no's relating to the current submission

~~Total for lot, [illegible]~~

State condition no. under which this application is required

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